

|                             |                         |              |                        |                                   |
|-----------------------------|-------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>09/427,114 | FILING DATE<br>10/26/99 | CLASS<br>709 | GROUP ART UNIT<br>2756 | ATTORNEY DOCKET NO.<br>009683-353 |
|-----------------------------|-------------------------|--------------|------------------------|-----------------------------------|

APPLICANT

MITSURU OBARA, TOYOHASHI-SHI, JAPAN; KENICHI SAWADA, TOYOHASHI-SHI, JAPAN; ATSUSHI ISHIKAWA, OKAZAKI-SHI, JAPAN; KAZUHIRO ISHIGURO, TOYOHASHI-SHI, JAPAN.

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED

NONE TM 08/30/04

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

NONE TM 08/30/04

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

JAPAN

10-311381

10/30/98

TM 08/30/04

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/18/99

|   |  |                         |                      |                    |                         |
|---|--|-------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> no<br><input type="checkbox"/> Yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY<br>JPX | SHEETS DRAWING<br>18 | TOTAL CLAIMS<br>20 | INDEPENDENT CLAIMS<br>2 |
| Verified and Acknowledged<br>Examiner's Initials            |  | Initials                |                      |                    |                         |

SEE CUSTOMER NUMBER: 021839

ADDRESS

TITLE

DATA PROCESSING SYSTEM HAVING PLURALITY OF PROCESSORS AND EXECUTING SERIES OF PROCESSING IN PRESCRIBED ORDER

|                              |   |   |
|------------------------------|---|---|
| FILING FEE RECEIVED<br>\$760 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|------------------------------|---|---|

BEST AVAILABLE COPY